



Findings from the 2026 Novel Bird Flu Tabletop Exercise

Tribal Public Health Emergency Preparedness Conference
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Background Information

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Background Information



Notifiable Conditions in WA

- In Washington state, health care providers, health care facilities, laboratories, food service establishments, child day care facilities, and schools are legally required to notify public health authorities at their local health jurisdiction of suspected or confirmed cases notifiable conditions





Notifiable Conditions

Confusion about when and how to report notifiable conditions to Tribal health jurisdictions

Reporting under WAC 246-101 is determined by residence rather than by Tribal membership, race, or place of birth

Identification of Tribal affiliation is not required.

Share information with Tribal health jurisdictions in an equal manner that information is shared with local health jurisdictions



Notifiable Conditions - Updated WAC

- Previous legislation to get WAC updated to no longer exclude Tribes from receiving notification of communicable disease. Did not pass
- Continue efforts to update state regulations and systems to ensure Tribal health jurisdictions are timely notified of notifiable conditions occurring within their jurisdictions





Notifiable Conditions Gap

- Current notifiable conditions systems pose an ongoing challenge and risk to public safety
- Systems were built to be used by LHJs responding to notifiable conditions, but they are not the only public health authority with that **responsibility**
- During COVID-19 pandemic, Tribes were having to fax cases to locals to be uploaded to WDRS, increasing the workload for both Tribes and LHJs



Tribal Public Health Powers

Tribal jurisdictions exercise a wide range of governmental public health powers including, but not limited to, the following functions:

Declare	Order	Close	Establish	Investigate	Surveil
Declaring public health emergencies	Ordering mandatory isolation and quarantine	Closing businesses and off-reservation borders	Establishing priority groups and service populations for dispensing vaccines	Performing case and contact investigations	Conducting data surveillance



About the Exercise



Scenario Development



- With the notifiable conditions gap identified, we began planning an exercise to encourage conversations related to communications around a notifiable conditions outbreak



Participants

- Invited Tribes, Urban Indian Health Programs, individuals at DOH involved in policy work, LHJs from WA public health emergency regions



Specific Objectives

- Clarify legal authorities including emergency powers, reporting requirements, and response roles.
- Assess ability to effectively coordinate novel bird influenza outbreak across Tribal and nontribal jurisdictions.
- Identify strengths and areas for improvement.
- Identify potential legal issues.
- Identify gaps in policy.
- Assess resource- and information-sharing between Tribal and non-Tribal jurisdictions.





Assumptions



- The purpose of this exercise is to identify gaps and vulnerabilities.
- No jurisdiction is fully prepared for this type of public health emergency.
- Open, honest and respectful dialogue and feedback are expected and valued throughout the exercise.
- Today's exercise, discussions, and findings will inform future preparedness planning and actions.



Conducting the Exercise



Day One – November 5, 2026

- A 6-year-old reports to your local hospital emergency room with fever, cough, sore throat, body aches, and difficulty breathing.
- Upon examination, the child is diagnosed with pneumonia. The physician orders an RT PCR to be sent to the state public health lab and admits the child to the hospital to begin treatment for pneumonia.





Day Three – November 7, 2026



- Lab results positive for novel bird flu
- Local public health and DOH are notified
- Case and contact investigation at the LHJ finds:
 - Patient is AI/AN and lives within Tribe X's jurisdiction
 - Family keeps backyard birds (chicken and quail; recently had a few birds get sick and isolated them from the flock, those birds passed away and were buried on property)
- DOH releases press statement



Day Four – November 8, 2026



- A child (4), and an elder (55) report to the Tribe X's clinic experiencing fever, cough, shortness of breath, and conjunctivitis
- Both are sent to local hospital with low blood oxygen level
- Hospital sends RT PCR sent to state lab
- News about the first confirmed case has created some panic in the Tribe X's community



Day Five – November 9, 2026 Morning

- Positive tests for the elder and one child
- Genetically linked to first case
- Local public health notified
- News about new cases has created some panic throughout the county





Day Five – November 9, 2026 Afternoon



- Case and contact interview finds that these patients are Tribal members from Tribe X in one family who are not living on the reservation but out in the county
- All attended a community trunk or treat event held at Tribe X



Day Six – November 10, 2026

- Community is concerned
- Increase in worried well hospital visits
- Misinformation spreading on social media
- CDC and State issue guidance that Tamiflu can be given to patients with suspected or confirmed bird flu and that seasonal influenza vaccine may provide some protection and should be prioritized
- No vaccine currently exists for this strain of influenza





Days Seven – Fourteen November 12-19, 2026

- No additional suspected cases identified in the state



**PULLING TOGETHER
FOR WELLNESS**



Days 1, 3, 4, and 5(am) Discussion



- What actions (if any) will you take at this time?
- Who will you communicate with?
 - Within your jurisdiction
 - Outside of your jurisdiction
- What is the nature of the communication?
 - How do you communicate?
 - What information do you share?
 - Do you have contact information immediately available to you?



Day Five Afternoon Discussion



- **What does your response structure look like at this point?**
 - declare emergency
 - Taskforce
 - readiness group
 - Tribal Council's involvement?
- **If you have not declared an emergency, how will you determine whether/when to declare one?**



Day Six Discussion



- How will your jurisdiction assess if local supply of Tamiflu will meet your needs?
- How would this impact your seasonal influenza vaccination activities?



Days 7-14 Discussion



- If you activated for response, what factors influence your demobilization?
- What protective measures and public health efforts will stay in place through the rest of flu season?

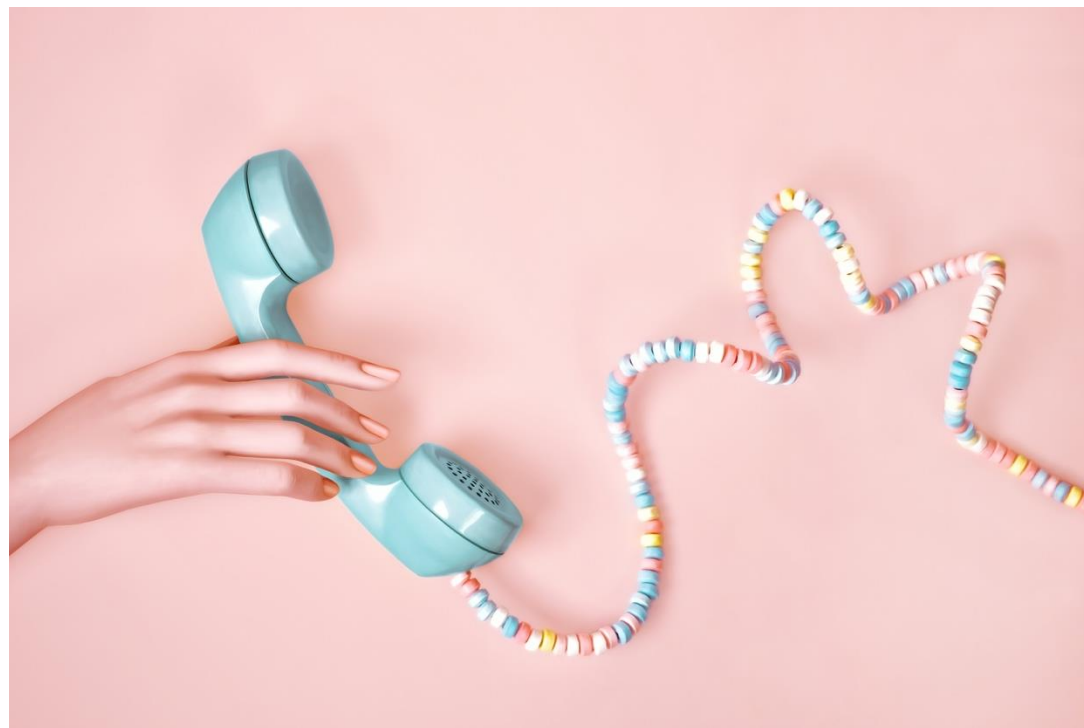


Findings



Who Notifies Tribes?

- Across the breakout groups used for the exercise, there was not a clear answer as to who would notify the Tribe OF A NOTIFIABLE CONDITIONS CASE WITHIN THEIR JURISDICTION
- The selected pathogen is one that could cause the next pandemic, and the jurisdiction with authority to order isolation and quarantine did not know about the case





Staff Turnover



- Introductions and the hotwash activity highlighted that there has been significant turnover since COVID-19
- People were unfamiliar with previous work done together in plans, exercises, and developing Mutual Aid Agreements
- The Yellow Book had a lot of outdate information related Tribal leadership



Understanding Tribal Sovereignty

- New staff also were not sure about how to work with Tribes
- Questions asked during exercise:
 - Who has authority to do case and contact investigation on reservation?
 - Who has authority to order isolation and quarantine on reservation?
 - Who at the Tribe would you contact outside of normal business hours?



**PULLING TOGETHER
FOR WELLNESS**





Cross-Jurisdictional Collaboration



- Working together takes practice!
- Most jurisdictions had enough staff turnover that working with a Tribe was something new for them
- “If you’ve worked with one Tribe, you’ve worked with one Tribe.”
- Participants approached from a place of wanting to learn, which is wonderful!



Next Steps



Next Steps

- Small notifiable conditions workgroup with DOH working to try and develop some ideas around notifiable conditions being reported to Tribes
- Another exercise! Some suggestions to go regional
- AIHC will continue to provide training related to Tribal sovereignty, Tribal public health authority, and working on legislation to require Tribes to be notified